

azdot.gov

96-0424 R09/14

Mail Drop 527M Motor Vehicle Division PO Box 2100 Phoenix AZ 85001-2100 602-712-6775 mvdmcs@azdot.gov

IFTA RENEWAL

Applications received after November 1st will be handled in the order they are received. Processing of your IFTA credentials by the end of the calendar year cannot be guaranteed.

This application is for renewals only.

A \$10.00 filing fee must be paid with this application. Do not include any other payments on the check.

				_
MVD Account Number	IFTA Account Number	-		
0	AZ			
Company Name		Doing Business As (DBA)		
Business Phone	Contact Person Name			
()				
Number of IFTA Qualified Vehicles *				
*IFTA Qualified Vehicle is a mo operates in two or more IFTA mer			nsportation of p	ersons or property, that
 Has two axles and a gross y 	vehicle weight (GVW) exc	eeding 26 000 lbs · or		

- Has two axles and a gross vehicle weight (GVW) exceeding 26,000 lbs.; or
- Has three or more axles regardless of weight; or
- Is a tractor/trailer combination exceeding 26,000 lbs.
- Does not include recreational vehicles

Applicants licensed as AZ IFTA Only with no Apportioned Registration must provide the following:

- An original Lease Agreement Certificate (form #70-0901) for each vehicle, and
- A copy of the current registration for each vehicle requiring IFTA decals

Applicants licensed as an AZ IFTA Only with full-base, registered/plated vehicles in AZ, must provide:

- A statement as to why the vehicles are not registered for interstate travel, and
- A copy of the current registration for each vehicle requiring IFTA decals

Mail the completed application and required documentation to the address above, along with the \$10.00 filing fee. Make check payable to Motor Vehicle Division, and include the MVD Account Number on the check.

Do not include the IFTA Quarterly Tax Report with this application.

Attach an original or certified copy of a Power of Attorney – Motor Carrier and Tax Services (form # 96-0441), if someone other than an owner, partner or corporate officer signs the application.

I agree to comply with the provisions of the International Fuel Tax Agreement. I certify that the information contained on this application is true, accurate and complete, to the best of my knowledge.

Authorized Person Name	Signature	Date

□ Address Change – Your credentials will be sent to the address on record. If your mailing and/or business address have changed within the last 6 months please check this box, then complete and sign the change of address section on the back of this application. Documentation must be included with this application for a physical location change.

MVD Receipts Accounting Use	Date Payment Processed	Processed By		
Date Credential Processed	Issued By		IFTA Decal Numbers	
			From:	To:

Address Change Request

Your credentials will be sent to the address on record. If your mailing and/or business address have changed within the last 6 months complete this section.

Mailing Address

Previous Mailing Address	City	State	Zip
New Mailing Address	City	State	Zip

Business Physical Address (verification document must be included with this application)

Verification of the business physical location in Arizona is required when requesting an address change for the business location. Include a copy of one of the following documents (must be current) where the applicant name is the same on this application.

- · Real estate tax bill
- · Rent or mortgage payment receipt
- Utility bill
- IRS Form 2290

Previous Physical Address		City	State	Zip	
New Physical Address		City	State	Zip	
Applicant Name Applicant Signature			Date		